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Posz & Bethards, PLC

703-707-9112

#18/Notice of Appeal
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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): SUZUKI et al.

Application No.: 09/675,209

Filed: September 29, 2000

Title: SEMICONDUCTOR DEVICE AND
METHOD FOR MANUFACTURING
THE SAME

Attorney Docket No.: 01-085-RCE

Group Art Unit: 2814

Examiner: FARAHANI, DANA

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TECHNOLOGY CENTER 2800

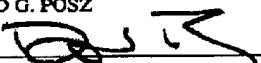
March 20, 2003

Assistant Commissioner for Patents
Washington, D.C. 20231

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Typed Name: DAVID G. POSZ

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NOTICE OF APPEAL TRANSMITTAL LETTER

Sir:

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Respectfully submitted,


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NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES		Docket Number (Optional) 01-085-RCE
<p>I hereby certify that this correspondence is being hand delivered to and deposited with the USPTO at the Customer Service Window, Office of Initial Patent Examination, Crystal Plaza Building 2, Room 1B03, 2011 South Clark Place, Arlington, VA 22202</p> <p>on <u>March 20, 2003</u></p> <p>Signature _____</p> <p>Typed or printed Name <u>David G. Posz</u></p>	In re Application of SUZUKI et al.	
	Application Number 09/675,209	Filed September 29, 2000
	For SEMICONDUCTOR DEVICE AND METHOD FOR MANUFACTURING THE SAME	
	Group Art Unit 2814	Examiner FARAHANI, DANA
<p>Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner.</p> <p>The fee for this Notice of Appeal is (37 CFR 1.17(b)) <u>\$ 320.00</u></p> <p> <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: <u>\$ FAX RECEIVED</u> <input type="checkbox"/> A check in the amount of the fee is enclosed. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input checked="" type="checkbox"/> The Commissioner has already been authorized to charge any fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet. <u>TECHNOLOGY CENTER 2800</u> <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. <u>50-1147</u>. I have enclosed a duplicate copy of this sheet. <input type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed. </p> <p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p> <p>I am the <input type="checkbox"/> applicant/inventor. <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) <input checked="" type="checkbox"/> attorney or agent of record. <u>David G. Posz (Reg. No. 37,701)</u> <input type="checkbox"/> attorney or agent acting under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a). <u>March 20, 2003</u> <u>Date</u> NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*. </p>		
<input type="checkbox"/> * Total of _____ forms are submitted.		

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